UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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Prefix

DATE RECEIVED

Serial

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (☐ check if this Units of Working Interests in Hi			d indicate chan	ge.)	
Filing Under (Check box(es) that a		□ Rule 505	X Rule 506	☐ Section 4(6)	□ ULOE
Type of Filing: X New Filing	☐ Amendment				PROCESSED
	A. BASIC ID	ENTIFICATION	N DATA_		
1. Enter the information requested	about the issuer			K	
Name of Issuer (check if this is an a	mendment and name has chang	ged, and indicate cha	inge.)	4	APR U 0 2005
High Purity Income Fund, L.P.					
Address of Executive Offices	(Number and Street, City	y, State, Zip Code	Telephone Num	ber (Including Area C	Code) THOWSON
4225 Executive Square, Suite 386	0, La Jolla, California 920)37	(858) 550-884		FINANCIAL
Address of Principal Business Operatio	ns (Number and Street, City, S	tate, Zip Code)	Telephone Nun	nber (Including Area	Code)(if different from
Executive Offices)					
4225 Executive Square, Suite 380	<u>0, La Jolla, California 920</u>	037			
Brief Description of Business					
Oil and gas exploration and proc	luction				- CHENCO CO
Type of Business Organization					
□ corporation	X limited partnership			☐ other (please	specify):
☐ business trust	limited partnership	o, to be formed			<u>/ </u>
		Month Yea	ır		
Actual or Estimated Date of Incorp	ooration or Organization:	<u>01</u> <u>05</u>	X Actual 🗆 E	stimated	
Jurisdiction of Incorporation or Or	ganization: (Enter two-lette	er U.S. Postal Ser	vice abbreviatio	on for State: CA	185/49
•		a: FN for other fo			465 100 1 3h

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, NW, Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each stat where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years:	
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% of	or more of a class of equity
securities of the issuer:	
Each executive officer and director of corporate issuers and of corporate general and managing partner Each general managing partner of partnership issuers.	s of partnership issuers; and
Check Box(es) that Apply: ☐ Promoter X Beneficial Owner ☐ Executive Officer ☐ Director	X General and/or Managing Partner
Full Name (Last name first, if individual) McIntyre, Michael	
Business or Residence Address (Number and Street, City, State, Zip Code)	
4225 Executive Square, Suite 380, La Jolla, California 92037	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet as necessary.)	

2 of 8

					B. INF	ORMA	TION A	BOUT OI	FERING				
				Ans	wer also	in Appe	endix, Col	lumn 2, if	filing unde	r ULOE.			Yes No □ <u>X</u>
2. What	is the m	ınımum 11	nvestmen	t that Wi	II be acce	eptea ir	om any in	dividual?					\$ 26,471 or of exceptions
3. Does	the offer	ing perm	it joint ov	vnership	of a sing	gle unit	?			.			Yes No X □
1 Enter	the infor	mation re	auected f	for each r	sercon w	ho has k	seen or wi	ll be poid	or aiven di	rectly or i	ndirectly	ny commi	ssion or similar
remur persor than f	neration: n or ager live (5) p r only.	for solicit at of a bro ersons to	ation of p ker or dea	urchaser aler regis	s in conr tered wit	nection the SI	with sales EC and/or	of securiti	ies in the of te or states,	fering. If list the na	a person t ime of the	o be listed broker or	is an associated dealer. If more r that broker or
Full Nam			, if indiv	idual)			<u> </u>						
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		<u>rento Par</u> lence Ado					a 92121 tate, Zip (Code)					
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Name of	Associa	ted Broke	r or Deal	er									
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(Cnec	K "All S [AK]					x[CO]	[CT]	[DE]	[DC]	x[FL]	[GA]	x[HI]	□ All States x[ID]
x[IL]						[LA]	[ME]	[MD]	x[MA]	x[MI]	x[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]				-	[NM] x[UT]	x[NY] [VT]	[NC] x[VA]	[ND] x[WA]	x[OH] [WV]	[OK] x[WI]	x[OR] [WY]	[PA] [PR]
Full Nam	ne (Last i	name first	if indiv	idual)									
1 411 1 1411	io (Edot)	ranno mior	, 11 1114111	id dail)									
Business	or Resid	lence Add	iress (Nu	umber an	d Street,	City, S	tate, Zip (Code)					•
Name of	Associa	ted Broke	r or Deal	er									
States in	Which F	erson Lis	sted has S	Solicited	or Intend	ds to So	licit Purcl	nases					
(Chec	k "All S	tates" or	check ind	ividual S	States								□ All States
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME			[FL] [MI]	[MN]	[MS]	[MO]	
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY [VT				[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam									.] ['' ']			[1 10]	
	·			ŕ									
Business	or Resid	lence Ado	dress (Nu	ımber an	d Street,	City, S	tate, Zip (Code)		12.0.2.318			
Name of	Associa	ted Broke	r or Deal	er									
						ds to So	licit Purcl	nases					
-	k "All S [AK]	tates" or o	check ind [AR]	lividual S [CA]	States [CO]	[CT] [DI	 E] [DC	[FL]	[GA]	[HI]	[ID]	□ All States
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME	[M	D] [MA	A] [MI]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT				[WI]	[WY]	[PR]	

(use blank sheet, or copy and use additional copies of this sheet, as necessary.)

 1		RING PRICE, NUMBER OF INVESTORS, EXPENSES AND price of securities included in this offering and the total amount already	D USE OF PROCE	EDS
	sold. Enter "O" if answer is	"none" or "zero." If the transaction is an exchange offering, check this olumns below the amounts of the securities offered for exchange and		
	Type of Security		Aggregate Offering Price	Amount Already Sold
	Debt		\$0-	\$ <u>-0-</u>
	Equity		\$0-	\$ <u>-0-</u>
		□ Common □ Preferred		
	Convertible Securities	es (including warrants)	\$0	\$ <u>-0-</u>
	Partnership Interests		\$0	\$0-
	Other (Specify	working interests	\$264,712	\$ 264,710
	Total		\$264,712	\$_264,710
		Answer also in Appendix, Column 3, if filing under ULOE.		
2.	offering and the aggregate d	ited and non-accredited investors who have purchased securities in this ollar amounts of their purchases. For offerings under Rule 504, indicate o have purchased securities and the aggregate dollar amount of their		
			Number of Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	;	10	\$ 264,710
	Non-accredited Inve	stors	0	\$0-
	Total (fo	r filings under Rule 504 only)		\$
		Answer also in Appendix, Column 4, if filing under ULOE.		
3.	sold by the issuer, to date, i	g under Rule 504 or 505, enter the information requested for all securities n offerings of the types indicated, in the twelve (12) months prior to the s offering. Classify securities by type listed in Part C-Question	Type of	Dollar Amount
	Type of Offering		Security	Sold
	Rule 505		0	\$0-
	Regulation A		0 -	\$0-
	Rule 504		0	\$ <u>-0-</u>
	Total		0 -	\$ <u>-0-</u>
4. :	in this offering. Exclude information may be given	expenses in connection with the issuance and distribution of the securities amounts relating solely to organization expenses of the issuer. The as subject to future contingencies. If the amount of an expenditure is not the and check the box to the left of the estimate.		
	Transfer Agent's Fe	es		\$0-
	Printing and Engrav	ing Costs	🗆	\$ <u>-0-</u>
	Legal Fees			\$0-
	Accounting Fees			\$ <u>-0-</u>
	Engineering Fees		🛮	\$ <u>-0-</u>
	Sales Commissions	(specify finders' fees separately)	<u>X</u>	\$ 26,471
	Other Expenses (ide	entify) Organization and Offering Costs	<u>X</u>	\$_5,295

Total

_____X \$_31,766

	C. OFFERING PRI	CE, NUMBER OF INVESTORS, EXP	<u>ENSES AND USE OF PR</u>	OCEEDS
		egate offering price given in response to Part C - nse to Part C – Question 4.a. This difference issuer	-Question I	\$_232,946
5.	each of the purposes shown. If the amo	gross proceeds to the issuer used or proposed to unt for any purpose is not known, furnish an ea. The total of the payments listed must equal t esponse to Part C – Question 4.b above.	stimate and	
			Payments to	
			Officers Directors & Affiliates	Payments To Others
	Salaries and fees			□ \$ <u>-</u> 0-
	Purchase of real estate			□ \$ <u>-0-</u>
	Purchase, rental or leasing and in	stallation of machinery and equipment	🗆 💲 - 0 -	<u> </u>
	Construction or leasing of plant b	uildings and facilities		□ \$ <u>-0-</u>
	Acquisition of other businesses (ncluding the value of securities involved in this	s	
	offering that may be used in exchissuer pursuant to a merger)	ange for the assets of securities of another		_ \$ <u>-0-</u>
	Repayment of indebtedness			□ \$ <u>-0-</u>
	Working capital		S <u>-0-</u>	□ \$ <u>-0-</u>
	Other (specify): Leasehold acqui	sition costs, evaluation costs,		□ \$ <u>-0-</u>
	drilling, rewor	king, and completion costs		X \$ 225,005
	Administration fe	e	X \$ <u>7,941</u>	□ \$ <u>-0-</u>
	Column Totals		X \$ 7,941	<u>X</u> \$ <u>225,005</u>
	Total Payments Listed (column to	otals added	<u>X</u> \$ <u>2</u>	32,946
_		D. FEDERAL SIGNATUR	RE	**
ig	mature constitutes an undertaking by the	e signed by the undersigned duly authorized sissuer to furnish to the U.S. Securities and I non-accredited investor pursuant to paragrap	Exchange Commission, upon v	under Rule 505, the follow written request of its staff,
Ŀ	ssuer (Print or Type)	Signature	Date	
	HighPurity Income Fund I, L.P.		Mar	ch 24, 2005
Ν	Name of Signer (Print or Type)	Tatle di Signa (Print or Type)		
	Michael McIntyre	Manager of Managing Gen	eral Partner	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. S	TA	$T\mathbf{E}$	SIGNA	\mathbf{AT}	URE
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See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature A A A A A	Date
HighPurity Income Fund I, L.P.		March-24, 2005
Name of Signer (Print or Type)	Stille of Signes (Printer Type)	
Michael McIntyre	Manager of Managing General Partner	

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3	4		and the state of t		5 Disqualificat	ion
	Intend to s to non-acc investors i (Part B-Ite	redited n State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor amount purchase (Part C-Item 2)	under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I				
State	Yes	No	Units of Working Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X		10	\$264,710	0	0		Х
со						J			
СТ									
DE									
DC									
FL									
GA									
ні									
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MD									
МА									
МІ									
MN									
MS									
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1	Intend to sell to non-accredited investors in State (Part B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor a amount purchased (Part C-Item 2)	and d in State		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I		
MT								
NE								
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NJ								
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OR								
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